



Connecticut Community Providers Association
a unified voice for community human service providers

January 31, 2007

TO: Public Health Committee

FROM: Susan Niemitz, LCSW, Executive Director, Hartford Behavioral Health

RE: S.B. 1 An Act Increasing Access to Affordable, Quality Health Care

Good morning. I am Susan Niemitz, LCSW, Executive Director of Hartford Behavioral Health, a private nonprofit community-based provider. Our mission is to provide the highest quality, culturally competent behavioral health services to the residents of Hartford. We are primarily funded by DMHAS and DCF and provide outpatient services to over 1,000 adults, children and families each year. I am speaking to you today on behalf of the Connecticut Community Providers Association. CCPA represents organizations that provide services and supports for people with disabilities and significant needs including children and adults with addiction, mental illness, developmental and physical disabilities.

I would like to speak in support of S.B. 1 An Act Increasing Access to Affordable, Quality Health Care. We have two focal points in testifying today – advocating for the individuals we serve and raising issues from our perspective as health care providers.

The people we serve are consumers of health care services. They receive health insurance through Medicaid, Medicare, SAGA, HUSKY, Behavioral Health Partnership and private employers. But some of them are underinsured and others are uninsured. Whether insured or uninsured, they rely on the prevention and treatment services provided by community providers. They depend on the state's array of health care mandates. They benefit from state government's commitment to behavioral health parity. *An underpinning of any legislation you consider should*

be to keep Connecticut's health insurance mandates intact without any diminution in their scope. "Strip-down" plans will reduce access to health care, not augment it.

Community providers are part of the health care delivery system. We employ a large workforce of professional and paraprofessional workers who provide essential services – both prevention and treatment for over 500,000 Connecticut residents each year. Our services are provided in community-based settings, in outpatient clinics, in individual's homes and other residential settings, in schools and in multiple locations in all of Connecticut's 169 towns.

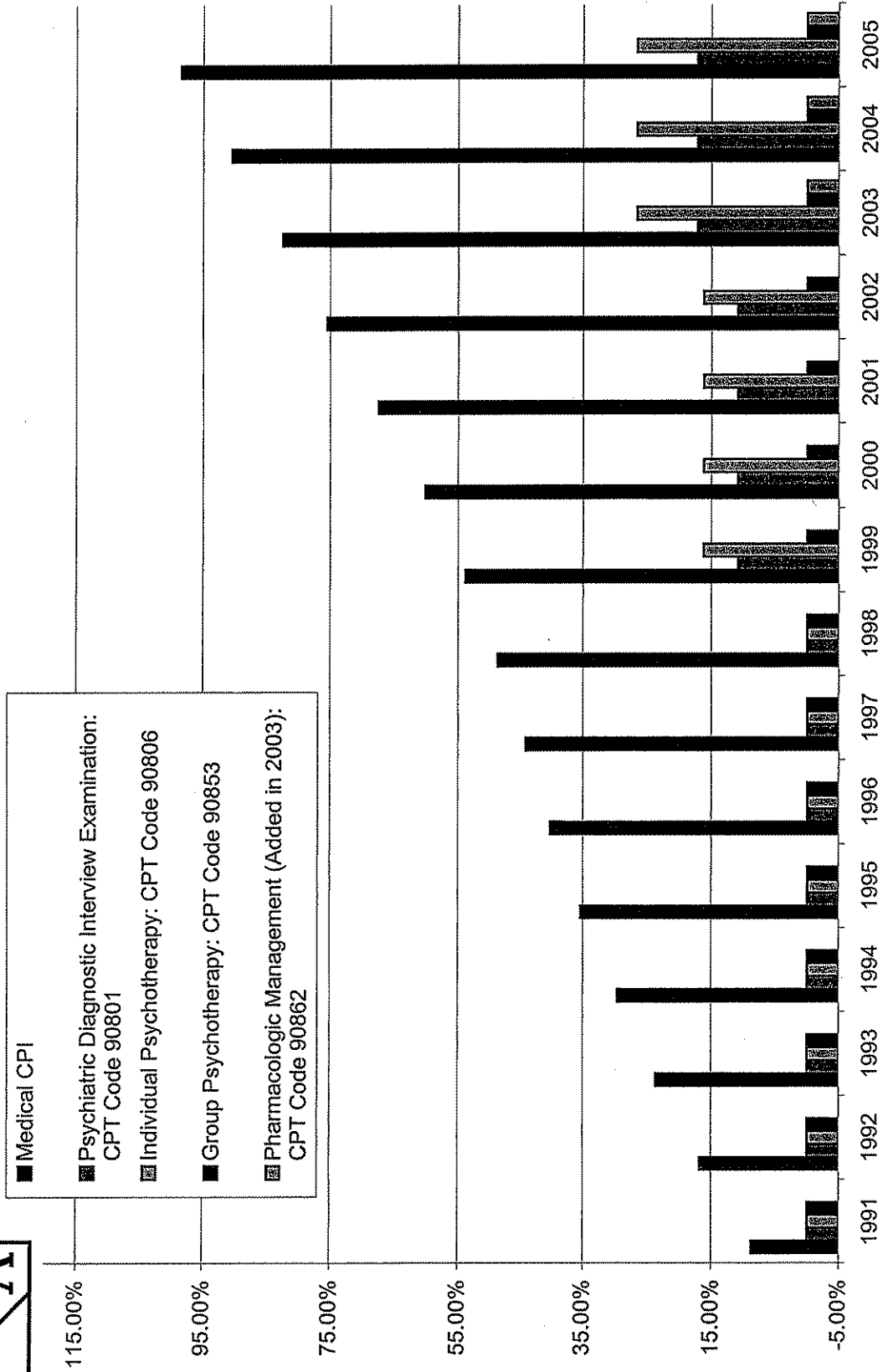
As you debate components of various health care plans, please consider that in order to provide prevention and treatment services, *rates and contracts should reflect the cost of providing the services. They should be adjusted annually to match the Medical CPI, Medicare rates or related indices.* Without such provisions the service delivery system will be destabilized and will never meet its promise.

Historically rates have not kept pace with inflation. Attached to our testimony, you will find two charts that depict four of the most commonly used Adult Community Mental Health Clinic Medicaid Rates in comparison to the Compounded Medical Consumer Price Index (CPI). As you see, Medicaid rates for outpatient mental health services have been funded at well below the standard inflationary indicators for years. Similar charts could be used to show under-funding of SAGA rates and of grants and contracts for DMR, DMHAS, DCF, DSS and other state agencies. Adequate provider rates are key to assuring access to services and expanding capacity.

We welcome the opportunity to work with your Committee as you forge a solution to our current health care crisis.



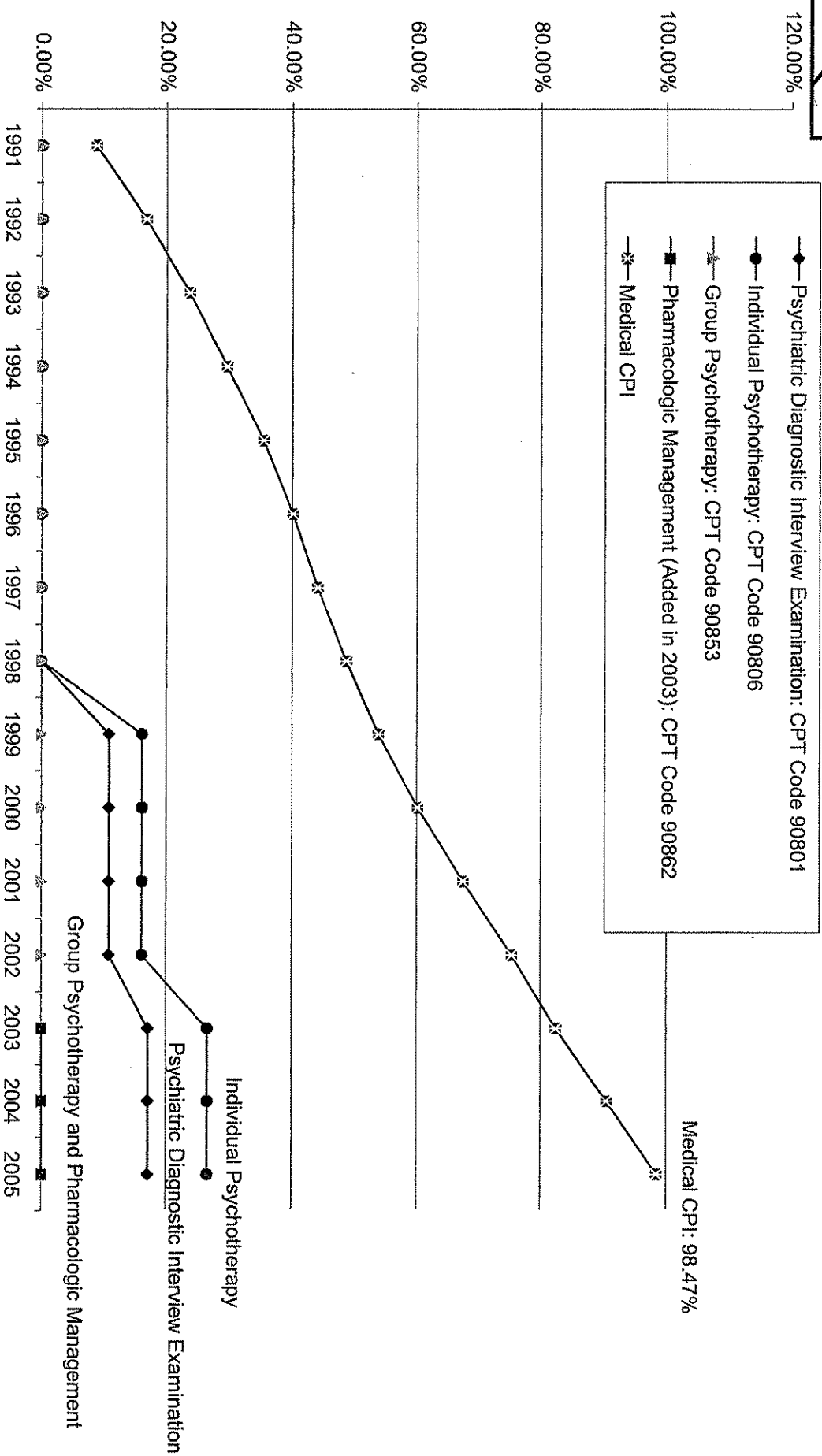
CCPA Analysis: Compounded Growth of Adult Community Mental Health Clinic Medicaid Rates Compared with Compounded Medical Consumer Price Index (CPI)



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